



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: CLI SURGERY CENTER KOKOMO
Street Address: 1601 W. Lincoln Rd
City: Kokomo
County: Howard
Administrator Name: Sheri Adams
Administrator Email: sadams@cataractandlaserinstitute.net
ASC Web Address:
Fiscal Year: 2018
Accredited: Yes No
Name of Accrediting Body: AAAHC
Deemed Status: Yes No
Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2536	3611
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1933	
66821	1195	
66982	217	
65855	130	
0191T	111	
66761	55	
15823	49	
67900	10	
65426	6	
67924	4	

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.

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